This Form is for INTERNAL PTO SE ONLY It does NOT get mailed to the applicant.

NOTICE OF FILING / CLAIM FEE(S) DUE (CALCULATION SHEET)

| Total Fee Calculation | | | | | | |
|---------------------------------------|------------|-------------------|-------------------|--|-------------|--------------|
| | Fee Code | Total # Claims | Number Extra X | . Fee | Fee | = Total |
| • | Sm./Lg. | | | Sm. Entity | Lg. Entity | |
| Basic Filing Fee | 201/101 | T 0 | _ | | | <u>- 768</u> |
| Total Claims >20 . | 203/103 | 5 / -20 = | 37 x 11 x | ************************************** | 18 | - 666 |
| Independent Claims >3 | 202/102 | -3 = | x | | 78 | = 358 |
| Mult. Dep Claim Present | 204/104 | | | | | = |
| Surcharge | 205/105 | | | | <u></u> : | = 130 |
| English Translation | 139 | | | | | |
| TOTAL FEE CALCULATION | | | | | | 2414 |
| Fees due upon filing the application: | | | | | | |
| Total Filing Fees Due = \$ | | | | | | |
| Less Filing Fees Subn | nitted -\$ | | , | | | |

Office of Initial Patent Examination

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BALANCE DUE